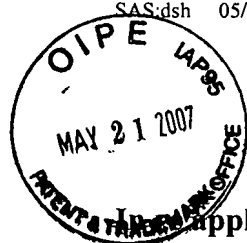


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SAS:dsh 05/18/07 5585-70349-01 700836 RCD/P100819US

PATENT

Attorney Reference Number 5585-70349-01



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Short and MacNeil

Application No. 10/525,639

Filed: February 22, 2005

Confirmation No. 9198

For: CELL CULTURE SURFACE

Examiner: Ruth A. Davis

Art Unit: 1645

Attorney Reference No. 5585-70349-01

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP AMENDMENT COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney or Agent
for Applicant(s)

Date Mailed May 18, 2007

MAIL STOP AMENDMENT
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

TRANSMITTAL LETTER

Enclosed is an Amendment and Response to Restriction Requirement for the above application. The fee has been calculated as shown below.

CLAIMS AS AMENDED					
For	No. after amendment	No. paid for previously	Present Extra	Rate	Fee
Total Claims	51	- 52*	= 0	\$25.00	\$ 0.00
Indep. Claims	3	- 5**	= 0	\$100.00	\$ 0.00
Three-month Extension of Time				\$510.00	\$510.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$510.00

* greater of twenty or number for which fee has been paid.

** greater of three or number for which fee has been paid.

☒ Applicants petition for an extension of time for the number of months indicated above. If an additional extension of time is required please consider this a petition therefor.

☒ A check in the amount of \$510.00 is attached.

05/22/2007 MWOLDGE1 00000012 10525639

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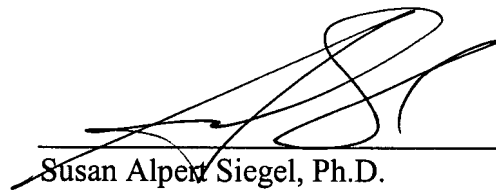
- ☒ Please charge any additional fees that may be required in connection with filing this amendment and any extension of time, or credit any overpayment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ If the Patent and Trademark Office determines that this amendment results in an additional application size fee for pages in excess of 100, please charge the fee to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

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By



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cc: Docketing